

STATE OF NEW HAMPSHIRE

2016 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

NOV 0 1 2017

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I. Name of Lobbyi	st(s)Michael_Licata			DEL ARTON
II. Name of lobbyi	st's partnership, firm or co	poration, if any	:	
Liberty_Utilities	s			
(1	Name of partnership, firm or corp	oration)		
15_Buttrick Ros	adI	ondonderry	NH	03053
Business Address:	(Street)	(Town/City)	(State)	(Zip Code)
(603) _216-3520 (Telephone	O ((Fax)	e-mail _micha	el.licata@libertyutilities.com_
	t covers: (Choose one – file s e transactions which are not			ay file a separate report for
X All reportable to	ransactions occurring in the m	onths prior to the	e reporting date relative to t	he following client:
Liberty_Utilitie	es(Full Name of Client as it a			
<u>OR</u>	(Full Name of Client as it a	ppears on the Lobb	yist Registration Form)	
		cluding the lobby	ist's family), or the lobbyin	g firm listed below which are
IV. Date of Report Reports cover: ac	t April 27, 2016 ctivity from date of registration t	o 3/31/16	July 27, 2016 activity from 4/1/16 to 6/30/16	6
•	October 27, 2016 X activity from 7/1/16 to 9/30/1		January 25, 2017 ☐ activity from 10/1/16 to 12/31/16	
	een no fees received and ned, complete just this form and 1.			
	ional reports are attached: eived fees or made expenditus	res, you must file	Addendum A- Fees and E	Expenses
Expense Reimburse		•		
X If you, your firm	n, or your family has made po	litical contribution	ons, you must file Addendu	m C- Political Contributions
I have read RSA 15	best of my knowledge and be		eby swear or affirm that the	foregoing information is true
WUMU	1 Aul		_10/25/2017(Da	
(Signature of lobby	yist)	_	(Da	nte)
_Michael_Licata_ (Print Name of lob	obyist)			

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STATE OF NEW HAMPSHIRE

Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

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	DE! AKIMENT
I. Name of Lobbyist(s)Michael_Licata	
II. Name of lobbyist's partnership, firm or corporation, if any:	
Liberty_Utilities	
(Name of partnership, firm or corporation)	
III. Name of ClientLiberty_Utilities	Date10/25/2017
IV. Fees Received Indicate the gross amount of all fees received from the client identified above to lobbying, including fees for services such as public advocacy, governmen including research, monitoring legislation, and related legal work. The gr reduced by any expenses:	t relations, or public relations services
a) Total of all fees received in this reporting period	a) \$687.24
b) Total of all fees received this calendar year, prior to this reporting period (This should equal the total of all prior monthly reports for this calendar y	b) \$9163.91
c) Total of all fees received to date (Add lines a and b)	c) \$9851.15
d) Indicate the amount of any such fees that are due, but have not yet been paid	d) \$0
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to refees. Separate reports are to be filed for expenditures made relative to each the lobbyist(s)/firm that are unrelated to any one client a separate report Expenses are to be reported in one of three categories of expenses: (a) the during the reporting period for salaries, benefits, support staff, and office expenses where the expenditure was of \$25.00 or less (for examp lunch where the cost was \$25.00 or less, purchase of a pen with a value of lebeing lobbied, purchase of a ceremonial object given to a person being lobbied (c) an itemized statement of each individual expenditure made during this report any purpose not covered by (a) (for example: purchase of a meal with value ceremonial object to be given to the subject of lobbying with a value great restaurant expenses for a legislative reception). Expenses for honorariums contributions will be reported on separate addendums and should not be reported.	client and if expenditures are made by may be filed for the lobbyist(s)/firm. e aggregate total of all expenses paid xpenses; (b) the aggregate total of all le: meals purchased during a business is than \$10 that is given to the person ed with a value of \$25.00 or less); and orting period of greater than \$25.00 for ue of greater than \$25, purchase of a er than \$25, but not greater than \$50, s, expense reimbursement, or political
a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.b) Total aggregate of expenditures during this reporting period, not reported	a) \$5833.28
in a), of \$25 or less.	b) \$0
c) Total of all itemized expenditures reported in detail in section VI.	c) \$ _0

d) Total expenses for this reporting period (Add lines a, b and c)	d) \$5833.28
e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report)	e) \$16029.57
f) Total of all expenses year to date	f) \$21862.85
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from leperiod, including by whom paid or to whom charged.	obbying fees during this reporting
Paid to:	Amount:
	\$
	\$
	\$
	\$
	\$
	\$
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm is true and complete to the best of my knowledge and belief.	n that the foregoing information
Muld Luc	
(Signature of lobbyist)	10/27/2017 (Date)
Michael_Licata	• •
(Print Name of lobbyist)	

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Lobbyists Report of Political Contributions Addendum C (RSA Chapter 15:6) RECEIVED

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II. Name of loobyist's parti	iership, firm or cor	poration, if any:		
Liberty Utilities				
(Name of partne	rship, firm or corporation)			
III. Name of ClientLibert	y_Utilities	Date10/27/2017		
Political Contributions For each political contribution client/lobbyist and lobbying			ter 664 paid on behalf of the	
	G	Cl. : l		
Full name of candidate:	Sununu (Last Name)	Christopher (First Name)	(Middle Name/Initial)	
			s Seeking _Governor	
mer air esimated varide and the	e word "estimate."			
		Chuck		
		Chuck (First Name)	(Middle Name/Initial)	
Full name of candidate:	Morse_ (Last Name)		(Middle Name/Initial) SeckingSenator_	
Full name of candidate: Amount of contribution \$10 If the contribution is an in-kind actual cost of the in-kind contri	Morse(Last Name) 100 I contribution, provide ibution on the line abo	Office Candidate is a description of the good	Seeking Senator Is or services provided, and enter the	
Full name of candidate: Amount of contribution \$10 If the contribution is an in-kind	Morse(Last Name) 100 I contribution, provide ibution on the line abo	Office Candidate is a description of the good		

If the contribution is an in-kind contribution, provide a descrip actual cost of the in-kind contribution on the line above for an	otion of the goods or services provided, and enter the nount of contribution. If the actual cost is not known,
enter an estimated value and the word "estimate."	· · · · · · · · · · · · · · · · · · ·
(If more than three contributions were made, report additional contributions)	outions on senarate addendum C forms
·	outons on separate assertions of forms.)
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 and hereby is true and complete to the best of my knowledge and be	
Muld Sul	10/27/2017
(Signature of lobbyist)	(Date)
Michael Licata	
(Print Name of lobbyist)	